**FSSAC Summer Summit – 09/11/03**
**Brainstorming – Areas of System Need**

Finance (5 dots)
- funding aligned with regional needs
- dollars/ enough resources
- stabilization of Part C (dollars)
- increased funding
- effective use of resources
- reduce caseload size of FSS's
- stable financing of services
- financial
- increase $ amounts for numbers served
- secure state and federal funding support to sustain, improve, and expand services
- explore alternative resources
- funded guaranteed health coverage of all children
- secure and stable funding
- stable $ resources
- unified efforts (refinancing, legislative, etc.) resulting in adequate funding to meet entitlement needs
- adequate funding or distribution of funding to address population shifts
- Legislative buy in to importance of Part C

Coordination of Services (7 dots)
- smooth transition C to B services
- continuum of services past Part C
- encourage and support CFS provider-public school
- better transitioning between services
- transition funding and planning for services
- IDEA Part C and Part B share a common performance goal indicator, common data measures, common report on transition from C to B
- consider needs of all children with different disabilities
- stronger links with services to all children
- services at HeadStart

Quality Control of Programs (4 dots)
- accurate information to consumers (families) and providers
- improve in-home monitoring of services
- reduce caseload size of family support specialists
- standards of services needed for deaf/hard of hearing children
- early learning guidelines and other EC systems are coordinated with Part C and EI services
- consistently continuity of care throughout Montana

Improved Efficiency  (6 dots)
- streamlined application process
- less paperwork
- streamlined forms – signatures


Data Systems: (4 dots)
- data sharing within State – "Communities of Practice"
- share data resources EI accounting and reporting
- development of data systems and central offices processes that return Montana to the top of the nation
- 1 year uniform data-based system concerning EI services
- OSEP and Montana has outcome based data to support benefits of early intervention
- Plan and develop a database that provides outcome information
- DPI would like transition indicators
- Discover and share resources with State
- Streamline – don't duplicate
- Coordination of measures
- Coordination of data
- Integration/ inclusion


Access (3 dots)
- improved access to all services
- accessibility to services
- easy access to services
- consider needs of all children with disabilities not just specific classifications, diagnoses, categories
- increase number of children identified
- timely referral from all primary referral professionals and centers
- decrease age of children initially identified
- increase referrals from medical services
- increase referrals from rural and agricultural communities
- CC R&R refer to EI and ECSE


Training (11 dots)
- in-service training on best practice for all services provided
- linked university and in-service training
- increase rural health provider knowledge of disabilities
- training and personnel prep
- improvement of certification processes and timely panels for all applicants
- cross training – Family Support Specialists – CCR&R workers
- increase awareness of career opportunities
- resources available (money, access topics) for adequate staff training
- family to family network
- parent/family training and education
- families know about childcare inclusion services

- daycare rates equalized for special needs kids
- better education of services available to the families
- childcare providers know about inclusion support
- info on financial resources

Public Awareness (10 dots)
- better awareness of services available
- improved awareness
- public awareness – ongoing
- more visibility in community
- medical profession awareness of Part C and DD services
- community involvement and awareness
- visibility
- info on financing resources
- understanding and dedication of all stakeholders to early intervention and Part C services